

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

RECEIVED

For filing with the Department of Ecology or with County Conservancy Boards

MAR 11 2011

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF CHIRAL REGIONAL OFFICE ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.) Change purpose(s) of use Add purpose(s) of use Change point(s) of diversion/withdrawal Add point(s) of diversion/withdrawal Change/transfer place of use Other (i.e. consolidation, intertie, trust water) Explain: Add Place of Use—No Expansion of Water	Use.	FOR OFFICE USE ONLY CHANGE NO. CSY-00879 >5 3 WRIA 57 DATE ACCEPTED 3 76 11 BY FEE \$ REC'D 05 11 2011 CHECK No. ECY Coding: 001-002-WR10285-000011 SEPA: Exempt Not exempt			
IF MORE SPACE IS NEEDED, ATTACH ADD	DITIONAL S	SHEETS (PLEASE PRINT OI	R TYPE CLEARLY)		
1. Applicant Information:					
APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.		
Frank Tiegs, LLC, and Lewis and Clark Ranch	n, LLC	(509) 545-4545	()		
ADDRESS					
P.O. Box 3110			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
CITY	CITY				
Pasco, WA 99302		WA	99302		
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.		
Tim Tippett		(509) 545-4545	()		
ADDRESS		(303) 343-4343			
Same as Above					
CITY		STATE	ZIP CODE		
		OI/III			
2. Water Right Information:	T				
WATER RIGHT OR CLAIM NUMBER CFO Claim No. 0879 Acquavella Proceeding		ed NAME(S) e attached CFO.			
No. 77-2-01484-5, Subbasin 31, Vol. 11	rei tile	attached CFO.			
(Signed by the Court November 1993).	Priority	Date: April18, 1969.			
And Per S4-01340C (April 1985).	Filonity	Date. April 10, 1909.			
Alla 1 61:04-010400 (April 1905).					
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO					
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:					
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST I	FIVE (5) YEA	ARS? X YES NO			
7					
Please attach copies of any documentation that derwas established. Also, if you have a water system application.					
was established. Also, if you have a water system application.					
was established. Also, if you have a water system application.	plan or co	onservation plan, please			
was established. Also, if you have a water system application. COURT CLAIM 0879 SUB 31 RICHLAND FOR OFF.	plan or co	onservation plan, please	include a copy with you		

C54-008793531

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
rface Water kima River	1			9 (See CFO)	10	27	(See Attachments)	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Same								
								74.0

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: X YES ☐ NO PROPOSED: X YES ☐ NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	86.1 cfs	15,015	February 1-November 30
4,620 Acres			

B. Proposed

Irrigation	86.1 cfs	15,015	February 1-November 30
Up to 5,370			

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: All within: Existing CFO and all within (or portions thereof):

Sections 9 and 10, T.10N, R.27 EWM;

Sections 15, 16, 21, and 22, T.10N, R.27 EWM;

Section 23, T.10N, R.27 EWM;

Sections 25, 26, 35, and 36, T.10N, R.27 EWM;

Section 27, 28, 33, 34, 35, 36, T.10N, R.27 EWM;

Section 2, T.9N, R.27 EWM.

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
					Benton		

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? X YES $\ \square$ NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

All abou					OF LANDS WHERE NEW USE IS	S PROPOSED:	
		ll within (
Section	17, 19,	20, 29, 3	0, and 3	1, T.10,	R.27 EWM.		
		-					
1/4	1/4	SEC.	TWP	RGF.	COUNTY	PARCEL#	# OF ACRES
1/4	1/4	SEC.	TWP.	RGE.	COUNTY Benton	PARCEL#	# OF AC

ECY 040-1-97 (Rev. 7/05) - 2 - APPLICATION FOR CHANGE

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

☐ YES X NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):	
6. Remarks and Other Relevant Information:	
The applicant will be relying on additional acres for crop rota duty crops (vineyards). There will be no expansion of the wa	
F FOR SEASONAL OR TEMPORARY, START DATE/	
Certain applications may incur a Real Estate Excise Tax liability for of Revenue has requested notification of potential taxable water right with a copy of this request.	
Please contact the State Department of Revenue for further informati The address is: Department of Revenue, Real Estate Excise Tax, PO	
7. Signatures:	
I certify that the information above is true and accurate to the order to process my application, I am hereby granting staff fro Conservancy Board access to the above site(s) for inspection a preparation of the above application, I understand that all respress with me.	om the Department of Ecology or the Con and monitoring purposes. If assisted in t
(Applicant)	(Date)
(Water Right Holder)	(Date)
(Land Owner(s) of Existing Place of Use)	/
(Land Chinolity of Externing Place of Cosy	lama
IMPORTANT! APPLICATION FILING INFORMATION IS	IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATIO	N FOR THE FOLLOWING	G REASON(S):
☐ APPLICATION FEE NOT ENCLOSED	☐ MAP NOT INCLUDE	ED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED	□ SECTION	IS INCOMPLETE
OTHER/EXPLANATION:		
STAFF:	DATE	E://

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6. Remarks and Other Relevant Information:	
IF FOR SEASONAL OR TEMPORARY, START DATE/ END DATE/	

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

AND LANGIS & CLANIC RANCH, LLC

likely For FRANK

2/2//II

IND CAPILIS + CLARK RANCH, LLC

Not Existing Place of Use) TIELS CLC

AND Cawina CLARK RANGERY WE

(Date)

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